Application or Docket Number

Paieni a <u>r</u>	PLICATION	LEE DE I	EKMINA	TION RECORD
	Effective	October	1 2001	

22911

						R 276 E004							
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL EN	VITTY	OR	OTHER SMALL				
TOTAL CLAIMS . 7 G					· .	RATE	FEE		RATE	FEE			
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS		/ 01 minus 20=		. 0			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS		3 minus 3 =		* 0			X42=		OR	X84=			
MULTIPLE DEPENDENT CLAIM PR			RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL	370	OR	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							·	SMALL	ENTITY	OR	OTHER SMALL I		
IΤΑ		CLAIMS REMAINING AFTER		HIGH NUM	IEST	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT	Total	AMENDMENT 47	Minus	PAID	FOR	-27		X\$ 9=	243	OR	X\$18=	FEE	
ME	Independent	• 6	Minus	*** 7	\$	=3		X42=	126	OR	X84=		
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM]	4.00	7-10		.000		
		•						+140= TOTAL	7.0	OR	+280= TOTAL		
								ADDIT. FEE					
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Colu	mn 2) Hest	(Column 3)	,			. :			
ENT B	1	REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY \ FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total	. 55	Minus	7	17	= 🗡		X\$ 9=	72	OR	X\$18=		
AMENDMENT	Independent	• 6	Minus	***	L]=		X42≖	1	OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	TCLAIM			+140=		OR	+280=		
		•			,		, .	TOTAL			TOTAL		
					,			ADDIT. FEE	•	OR	ADDIT. FEE		
		(Column 1)	1		mn 2)	(Column 3)	4 .	·					
ENTC	3	REMAINING AFTER AMENDMENT		NUN PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	. ·.	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=]	X\$ 9=		OR	X\$18=	,	
NE NE	Independent	*	Minus	***		=]	X42=			X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIN					OR			
+140= OR +280=													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE								OR	TOTAL ADDIT. FEE				
***If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													